Best Available Conv

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09742155

CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE			OB	OTHER THAN OR SMALL ENTITY	
TO	TAL CLAIMS				(30)3111727		Ī		FEE	OR I [
			38		1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2			RATE			RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
ТО	TAL CHARGEAI	BLE CLAIMS	38 minus 20=		18			X\$ 9=	162.00	OR	X\$18=	
	EPENDENT CL			nus 3 =				X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2							Į.	TOTAL	5170	OR	TOTAL	
CLAIMS AS AMENDED - PART II								•		•	OTHER	
	(Column 1) (Column 2) (Column 3)							SMALL E		OR	SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVI		PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	T OL 4 IL 4	=		X40=		OR	X80=	
L	FIRST PRESE	NTATION OF MI	JUIPLE DEP	ENDEN	CLAIM			+135=		OR	+270=	
							U	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		,								
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUN PREV	HEST MBER IOUSLY) FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	*	Minus	**		=		X\$ 9=	,	OR	X\$18=	
ME	Independent	*	Minus	***		=		X40=		OR	X80=	
V	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									Uh		
								+135=		OR	+270=	
										OR	TOTAL ADDIT. FEE	
)										
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUI PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON NON	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									1		
	If the entry in colu	ımn 1 ie loee than t	the entry in colu	ımn 2 wei	ta "N" in c	olumn 3		+135=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		nber Previously Pa					er fo	und in the ap	propriate bo	x in co	olumn 1.	